

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	✓	8	4-10-00
O.I.P.E. CLASSIFIER	AB	65373	4-17-00
FORMALITY REVIEW			6/22/00
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	3/8/00
2	✓	✓	3/14/00
3	✓	✓	3/14/00
4	✓	✓	3/14/00
5	✓	✓	3/14/00
6	✓	✓	3/14/00
7	✓	✓	3/14/00
8	✓	✓	3/14/00
9	✓	✓	3/14/00
10	✓	✓	3/14/00
11	✓	✓	3/14/00
12	✓	✓	3/14/00
13	✓	✓	3/14/00
14	✓	✓	3/14/00
15	✓	✓	3/14/00
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44	✓	✓	3/14/00
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46	✓	✓	3/14/00
47	✓	✓	3/14/00
48	✓	✓	3/14/00
49	✓	✓	3/14/00
50	✓	✓	3/14/00

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here